

**Heat Illness Prevention Policy**

Version 1

2023

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| The PFEW Policy Department has embarked on a programme to formulate and revise policy documents on matters of particular importance to its members.  It is the aim of PFEW to maintain clear policies on key topics that allow members to understand PFEW's official position on those areas.  These strategic documents are evidence-based, aligned with PFEW's Business Areas and championed by National Board members.    If you have any comments or queries, please direct them to [Bahar.Munim@polfed.org](mailto:Bahar.Munim@polfed.org) |
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**HEAT ILLNESS PREVENTION POLICY**

**Policy Principles and Rationale**

Representing the wishes of the membership, a policy is required to ensure that officers’ physical and mental health needs are prioritised. This policy was developed in response to the concerns raised by the Police Federation of England & Wales (PFEW) Health and Safety leads.

**Objectives of this Policy**

* To ensure our members’ welfare, health, and safety.
* Ensure all relevant health and safety legislation is complied with.

**Background**

The Police (Health & Safety) Act 1997 defines police officers as being ‘employees' and ‘at work' while on duty for the purposes of health and safety legislation. The Health and Safety at Work etc Act 1974 (HSWA) and the regulations made under it apply to all work activities of the Police Service. The primary duties under HSWA are on employers and since the 1997 Act, chief constables were deemed the employers of police officers and therefore primarily responsible for complying with this legislation. A breach of any of these duties is potentially both a civil and a criminal offence.

It is recognised that officers will inevitably face significant and serious dangers in the course of their work. Health and safety legislation exists to provide protections for both officers and the public and is not designed to hinder the police’s ability to deliver an effective emergency service. Likewise, the purpose of this policy is not to put barriers in place for policing activity but is merely designed to help keep safe officers who put themselves in harm’s way.

Heat illness is a serious and potentially life-threatening condition. It can affect police officers performing a range of operational duties and training. The purpose of this policy is to improve awareness and management of this risk, with the aim of eliminating injury and preventing deaths.

Heat illness refers to a range of medical conditions including heat exhaustion and heat stroke. It is difficult to distinguish between the conditions and they may exist at the same time. It can be caused by environmental conditions, such as extreme weather, or by exertion. For this policy, the term heat illness refers to a person becoming ill as a result of a rise in their core body temperature.

Climate change has made heatwaves potentially more likely and more severe. In July 2022 a temperature of over 40°c was measured in the UK for the first time, leading to the Met Office issuing a ‘red’ weather warning. A red weather warning means that it is very likely that there will be a risk to life and action must be taken to keep yourself and others safe.

If a non-essential physically demanding activity, or an activity that would lead to prolonged exposure to the heat, is planned during a period of high temperatures, PFEW believes forces must seriously consider postponing the activity. If postponing the activity is not an option, PFEW considers the direction and guidance in this policy must be considered.

PFEW believes this policy must apply to all police activities (where high temperatures exist), including (but not limited to) the following:

1. All forms of exercise, fitness tests, training, and organised sport.
2. Periods where officers are engaged in foot patrol.
3. Officers deployed at external events such as football matches and concerts.
4. Any operation where officers are wearing additional PPE, uniform or equipment e.g. PSU, AFOs, CBRN, or ceremonial events.
5. Static duties where exposure to direct sunlight is unavoidable.

**Policy Statement**

PFEW promotes the adherence to the following heat illness prevention policy statements:

1. A supervisor should be appointed to take responsibility for any activity where the risk of heat illness exists. Those taking part in an activity must know who their supervisor is.
2. The risk of heat illness must be considered in the risk assessment for all police activities.
3. The control measures in the risk assessment must be complied with. If the control measures in the risk assessment cannot be complied with, the supervisor must pause or stop the activity. However, if the activity must still go ahead, the supervisor must consider applying additional control measures and, if required, elevate the risk through their management chain for approval.
4. If heat illness symptoms are observed:
   1. The activity must be paused, dynamically risk assessed, and further control measures must be applied.
   2. The activity must only be restarted once further control measures have been applied with the approval of the supervisor (see Policy Statement 1 at Appendix 1).
   3. All suspected and confirmed heat illness casualties must be reported and investigated in accordance with Health and Safety Legislation.
5. Those involved in planning or undertaking activities which involve the risk of heat illness must receive suitable training.
6. PFEW will work with forces, the College of Policing and the NPCC to receive assurance that the content of this policy is complied with.

**Scope of the Policy**

The policy applies to all officers working across England and Wales.

**Key Stakeholders**

* [The National Police Chiefs' Council (NPCC)](https://www.npcc.police.uk/)
* [The Association of Police and Crime Commissioners (APCC)](https://apccs.police.uk/)
* [Home Office, UK Government](https://www.gov.uk/government/organisations/home-office)
* [PFEW Membership](https://www.polfed.org/)
* Local Branch Chairs and Secretaries
* [His Majesty's Inspectorate of Constabulary and Fire Service (HMICFRS)](https://www.justiceinspectorates.gov.uk/hmicfrs/)
* [College of Policing](https://www.college.police.uk/)
* Chief Police Officers' Staff Association (CPOSA)

This is not an exhaustive list.

**Policy Review**

Recommend to review after the 12-month period.

**Approved by National Board**: May 2023

**Appendix**

1 – Policy Statements in Detail

**Annex**

A – EXAMPLE WORK RATES including ‘ratings of perceived exertion’ (RPE)

B – Individual guide to heat illness

C – Hydration guidance

**Appendix 1**

**Policy Statements in Detail**

**Policy Statement 1**

**A supervisor should be appointed to take responsibility for any activity where the risk of heat illness exists. Those taking part in an activity must know who the supervisor is.**

The appointed supervisor must make sure that all those taking part in an activity are safe. That supervisor must make sure that:

1. Heat illness is considered when any activity is being planned.
2. Risk assessments are carried out and are approved before they are relied upon.
3. Controls to lower the risk are identified, communicated to relevant officers and complied with.
4. When an activity has been paused because symptoms of heat illness have been observed, a dynamic risk assessment is carried out and the activity does not start again until further controls have been put in place.

**Policy Statement 2**

**The risk of heat illness must be considered in the risk assessment for all police activities.** The risk assessment must as a minimum consider the following risk factors:

1. Clothing and equipment.
2. Expected work rate.
3. Working climate.
4. Location.
5. Individual risk factors.
6. Education and training.
7. Medical plan.
8. Fluid requirements.

Supervisors are responsible for making sure that risk assessments are carried out and that the control measures identified in the risk assessment are communicated to the officers taking part in the activity. Heat illness is a significant hazard and must be considered during the planning phase before an activity starts. Risk assessments must be carried out by competent officers.

The risk of heat illness should be considered as part of the wider risk assessment for the activity. All operational activities and training must consider the risk associated with heat illness. If a risk of heat illness has been identified, operation orders, exercise instructions and other instructions relating to the activity must make clear the control measures identified by the risk assessment and the need for dynamic risk assessments and controls during the activity.

The following five step risk assessment process should be considered:

Step 1 - Identify the hazard. The hazard is heat and exertion leading to an uncontrolled rise in core body temperature. This is usually related to the work rate of the activity, so the hazard is present throughout the year and in all environments.

Step 2 - Decide who might be harmed and how. The intensity of the activity and the rate of work causes an increase in body temperature, and the external temperature and humidity, along with clothing and equipment, affects the rate at which the body can cool itself. When the rate of heating is higher than the rate of cooling, body temperature will increase, sometimes to dangerous levels. All officers involved in the activity are at risk. Some are more at risk than others, depending on individual risk factors (for example, physical fitness) so medical advice may be needed.

Step 3 - Evaluate the risks and identify suitable and sufficient control measures. In order to decide which controls should be put in place, the risk assessment needs to consider the realistic likelihood and severity of the risk. If a risk is still assessed as ‘high’ after controls are put in place, consideration must be given to introducing further control measures to reduce the risk.

Step 4 - Record and implement findings. Once the planning has been completed it is time to act. The risk-assessment form should be used to record the whole risk assessment for the activity, including the assessed risk of heat illness. The controls identified during the risk assessment must be included in the instructions for the activity. Where relevant, before starting any activity officers must be briefed on the controls they should be aware of (for example, what action to take if a case of heat illness is identified). If the risk that remains after applying controls is higher than the level of acceptable risk delegated to the supervisor, then the risk must be elevated through the management chain for a decision.

Step 5 - Review the risk assessment and update as necessary. The risk assessment must be reviewed before an activity starts to make sure it is still valid and that all the controls are still in place. Once an activity has started, supervisors must ‘dynamically’ risk manage it. This means that further risk assessments (dynamic risk assessments) need to be carried out while the activity is underway to consider whether the risk assessment and controls need to be changed.

If something has changed further control measures must be considered. The dynamic risk assessment must be recorded so that there is evidence that it took place. This record can be as simple as a note in the supervisor’s pocket notebook or a logged message over the comms network. Reviews of risk assessments may be triggered by a specific event or circumstance e.g. increase in temperature, officers showing signs of heat illness.

The supervisor is responsible for reviewing and approving the risk assessment for the activity and must consider any additional controls that are needed before they approve the risk assessment.

The following are factors which should be considered as part of that process:

1. Clothing and equipment. Clothing affects a person’s ability to shed excess heat and, along with carrying equipment, may put extra strain on the body. Particular attention is needed when an activity requires the use of specialist clothing or equipment (for example, waterproofs, body armour, PSU, AFO or CBRN suits). Clothing must be carefully considered to make sure that it is appropriate for the activity and can be adjusted as required (for example, by removing layers of clothing).
2. Expected work rate. The rate the human body generates heat is determined by the work rate. It is critical to assess the work rate so the potential risk can be reduced by applying controls. The ‘rate of perceived exertion’ (RPE) scale (See Annex A) assesses individual work rates based on physical effort. During group activities, the work rate of the activity should be determined by the highest individual RPE maintained for more than three minutes.
3. Working climate - this includes air temperature, humidity, air movement and effects of working near a heat source.

There's no law for maximum working temperature, or when it's too hot to work. However, officers should be able to work comfortably with control measures.

1. Location. Body temperatures can also increase due to heat radiating from hot surfaces (for example, tarmac and vehicles). Physical exertion is affected by the nature of the activity, the climate, and the location.
2. Individual risk factors. People’s responses to heat vary greatly. Officers must inform the supervisor of any physical or medical condition that could affect the information the risk assessment was based on and their ability to undertake the activity safely. Individual risk factors to consider are as follows:

* Lifestyle factors – including fitness levels, smoker, activities in the last 24 hrs.
* Health factors – previous heat illness, recent or current mild illness, medication (prescription or over the counter), recent vaccinations, dehydration.
* Work factors – inexperienced officers, poor nutrition or diet, lack of sleep, air travel within the past 24 hours.
* Sunburn – sunburn increases the risk of heat illness. Minor sunburn causes reduced performance, while severe sunburn may require officers to be hospitalised. You will need to consider restricting the duties of officers who are sunburned. Sunburn can be prevented by:
  + wearing appropriate clothing and headwear;
  + working in the shade; and
  + applying water-resistant sunscreen.

1. Education and training. Inexperienced officers are typically more vulnerable to heat illness as a result of them:

* being less aware of the causes, signs and risks of heat illness;
* having less experience of the conditions which may give rise to heat illness; and
* less physical conditioning (for example, nutrition and training).

1. Medical plan. As part of the overall risk assessment, supervisors must make sure that a medical plan has been developed. The medical plan must identify an appropriate response to any casualties or medical incidents. The supervisor must make sure that the following elements have been considered as part of the medical plan:

* The level of medical cover (staffing) needed for the activity.
* The type and amounts of medical equipment needed for the activity (for example, equipment to optimise the ‘strip, spray, fan’ process (see Annex B)).
* How any heat illness casualties will be evacuated, and where they will be evacuated to.

1. Fluid requirements. Adequate hydration is essential to maximise heat loss through sweating. Supervisors must make sure that officers taking part in an activity drink an adequate amount of water before, during and after the activity. The water should be cool (if possible) and from a guaranteed safe source. Care should be taken to avoid overhydration and to maintain salt levels. There is more detailed hydration guidance in Annex C.

**Policy Statement 3**

**The control measures in the risk assessment must be complied with. If the control measures in the risk assessment or any other aspect of this heat illness prevention policy cannot be complied with, the supervisor must pause or stop the activity. However, if the activity must still go ahead, the supervisor must consider applying additional control measures and, if required, elevate the risk through their management chain for approval.**

The supervisor is responsible for reviewing and approving the risk assessment for the activity and must consider any extra control measures before approving the risk assessment. If any extra control measures are put in place, these must be recorded in line with step 4 of the five-step risk assessment process.

Once the risk assessment has been approved by the supervisor, it must be followed.

If at any stage of the activity, including before it starts, the guidance in this policy cannot be followed or the controls in the risk assessment cannot be met, the responsible senior manager must assess the risk.

They must then consider the following actions:

1. Pausing or stopping the activity - If the activity needs to be paused or stopped, a dynamic risk assessment must be carried out in line with policy statement 5. However, there are a very limited number of activities that may need to continue without pausing or stopping. Examples include live operations and other instances where pausing could cause a greater risk to life than continuing. The original risk assessments for these activities must indicate that a greater level of risk is acceptable for the task to be achieved. When this is the case, the level of risk must be elevated and approved at the appropriate level in the management chain before the activity starts.
2. Applying further control measures - Further control measures could be, for example, alternative ways of working, removing layers of clothing and so on. If the risk that remains after applying further control measures is higher than the level of risk the supervisor is authorised to accept, the risk must be elevated through their management chain.
3. Elevating the risk - If the risk of an activity is higher than the level of risk the supervisor is authorised to accept, the risk must be elevated through the management chain. In exceptional and unforeseeable circumstances where it is not possible or proportionate to refer the matter to an officer of higher rank, the supervisor may accept the risk. However, in these circumstances the supervisor must report their decisions up through their management chain at the earliest opportunity.

Note: all decisions made in connection with the actions above must be recorded in line with step 4 of the five-step risk assessment process during the planning stage, and in line with step 5 once the activity has started.

**Policy Statement 4**

**If heat illness symptoms are observed:**

1. **The activity must be paused, must be dynamically risk assessed and further control measures must be applied.**
2. **The activity must only be restarted once further control measures have been applied and with the approval of the supervisor at Policy statement 1.**
3. **All suspected and confirmed heat illness casualties must be reported and investigated in accordance with Health and Safety Legislation.**

When heat illness is suspected, the activity must be paused. The supervisor must carry out a dynamic risk assessment and must put further control measures in place to prevent other cases of heat illness. These extra control measures must be recorded, in line with step 5 of the five-step risk assessment process.

The activity can only start again once the actions from the dynamic risk assessment have been applied and the supervisor gives the approval for the activity to continue.

A local alert mechanism to inform others performing similar activities of heat illness should be part of the dynamic risk assessment process.

All suspected and confirmed heat illness cases must be reported in line with force and HSE Injury at Work reporting procedures and the responsibility for doing so rests with the supervisor. Suspected heat illness cases must be investigated to identify lessons that can be learnt.

**Policy Statement 5**

**Those involved in planning or undertaking activities which involve risk of heat illness must receive suitable training.**

**Policy Statement 6**

**PFEW will work with forces, the College and the NPCC to receive assurance the content of this policy is complied with.**

Assurance at different levels:

1. First-party assurance must be provided by those responsible for delivering the activity to reinforce the policy and make sure it is followed during the activity.
2. Second-party assurance must be provided by Chief Constables, separate from the assurance given by those responsible for delivering the activity.
3. Third-party assurance must be provided at College of Policing and NPCC that they support this policy as an effective way of safeguarding officers.

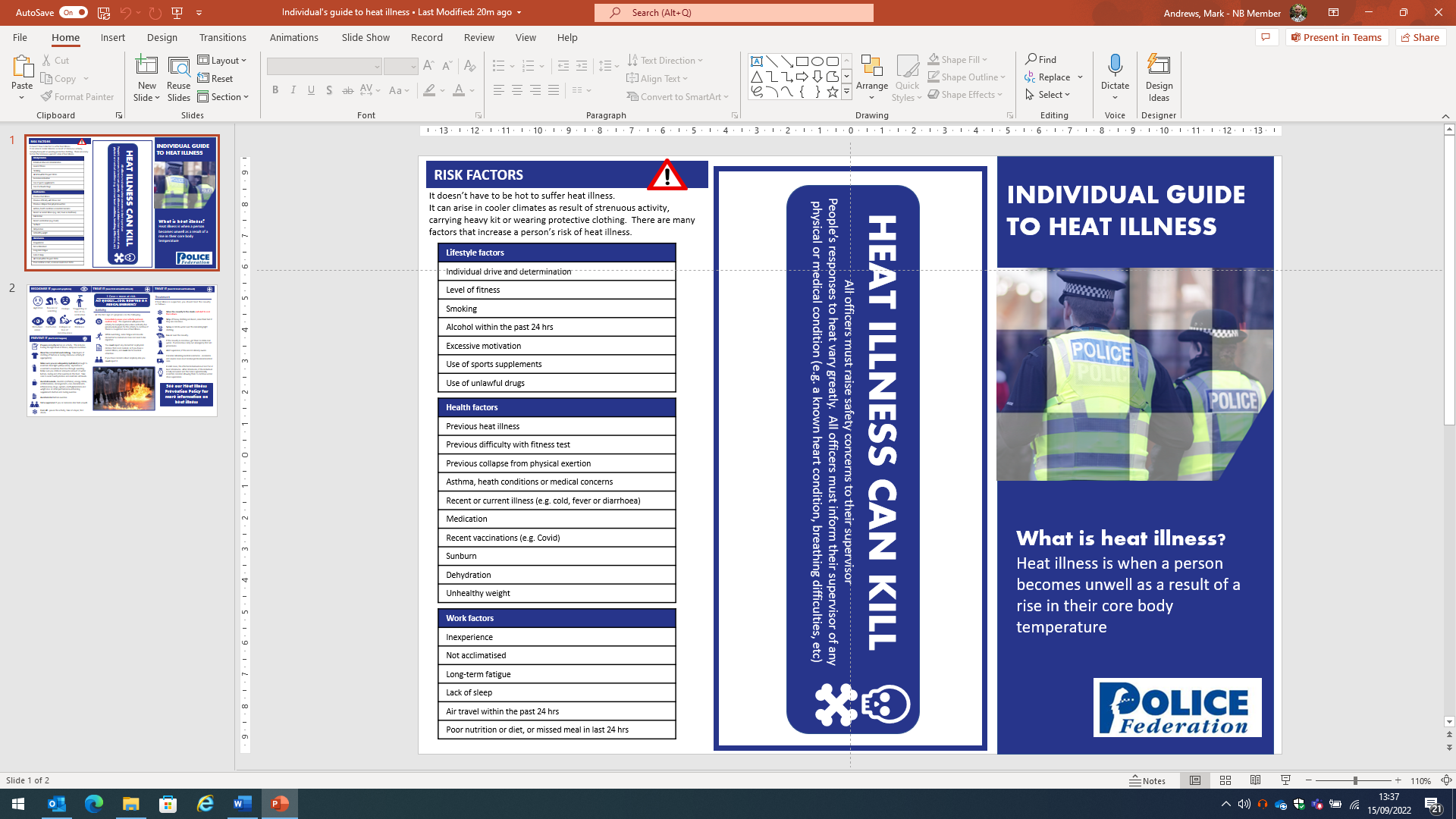
As part of their overall assurance activity, the supervisor, together with their senior manager, must make sure that this policy is being followed and put into practice effectively.

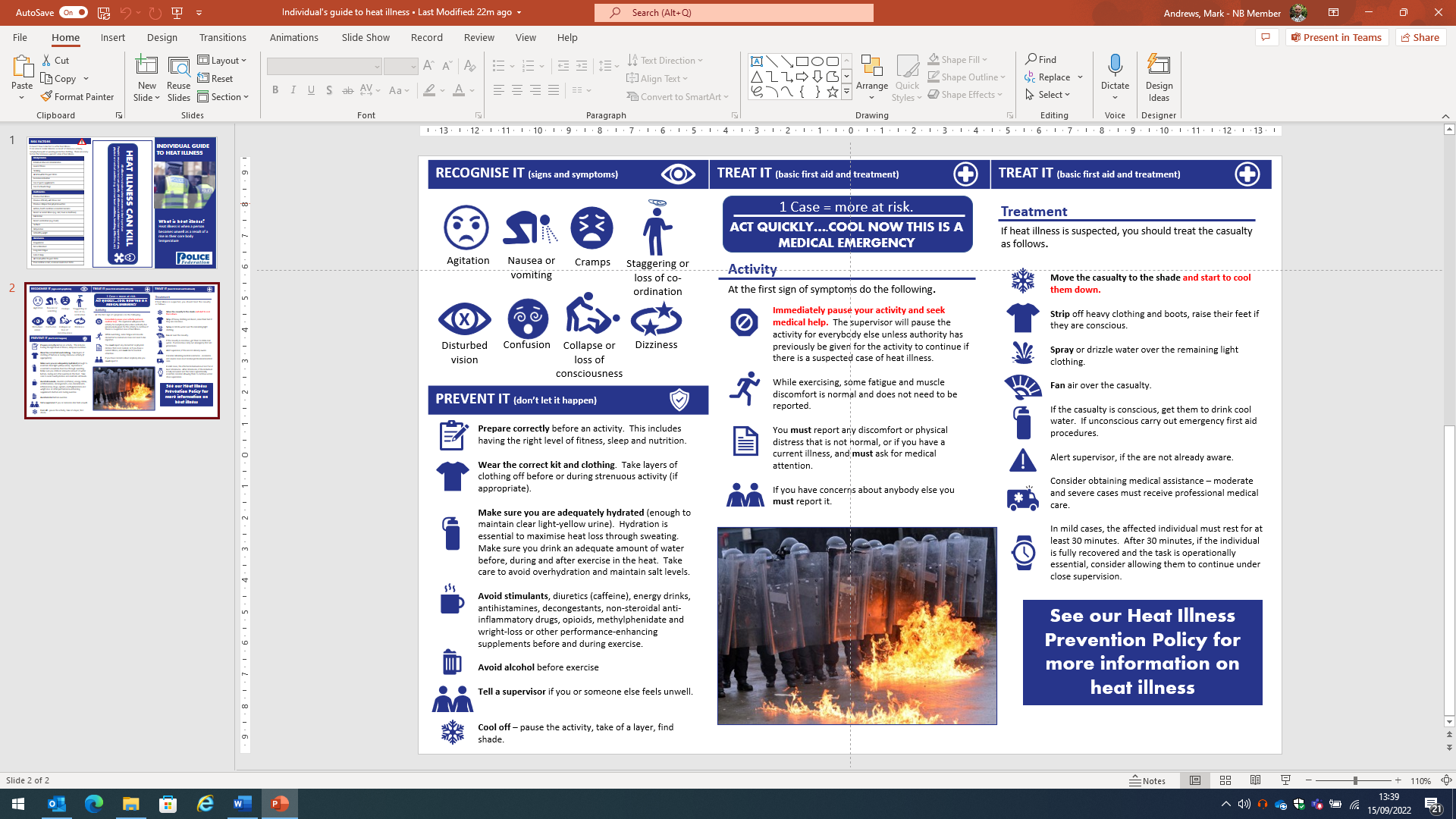
**ANNEX A**

**EXAMPLE WORK RATES including ‘ratings of perceived exertion’ (RPE)**

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|  | **Condition** | **Example** |
| Easy work (RPE of 1, 2 or 3) | Feels like you can keep going for hours  Easy to breathe and carry a conversation | * Office work under normal conditions   • Light manual labour such as cleaning and maintenance  • Basic operation of a vehicle, including routine embarking and disembarking  • Weapon training  • Static guard |
| Moderate work (RPE of 4, 5 or 6) | Breathing heavily, can hold a short conversation  Still quite comfortable but becoming noticeably more challenging | * Office work in a difficult environment   • Moderate manual labour involving some lifting and use of machinery or equipment  • Light manual labour in a difficult environment or within a time limit  • Foot patrol  • Ceremonial events  • Defence decontamination lane, CBRN recces and surveys |
| Hard work (RPE of 7 or 8) | Borderline uncomfortable  Short of breath, can speak a sentence but not maintain a conversation | * Hard manual labour involving lifting and using heavy machinery or equipment   • Moderate manual labour in a difficult environment or within a time limit  • Annual or role fitness tests and physically demanding selection events  • Physically demanding training such as ARG or CBRN  • Patrolling in CBRN, PSU or fully ARG personal protective equipment (PPE) |
| Very hard work (RPE of 9 or 10) | Very difficult or not possible to maintain exercise intensity  Can barely breathe and unable to speak or only able to speak a few words | * Hard manual labour in a difficult environment or within a time limit   • PSU officers dealing with on-going public order situation  • Evacuating a casualty while wearing CBRN PPE |

ANNEX B





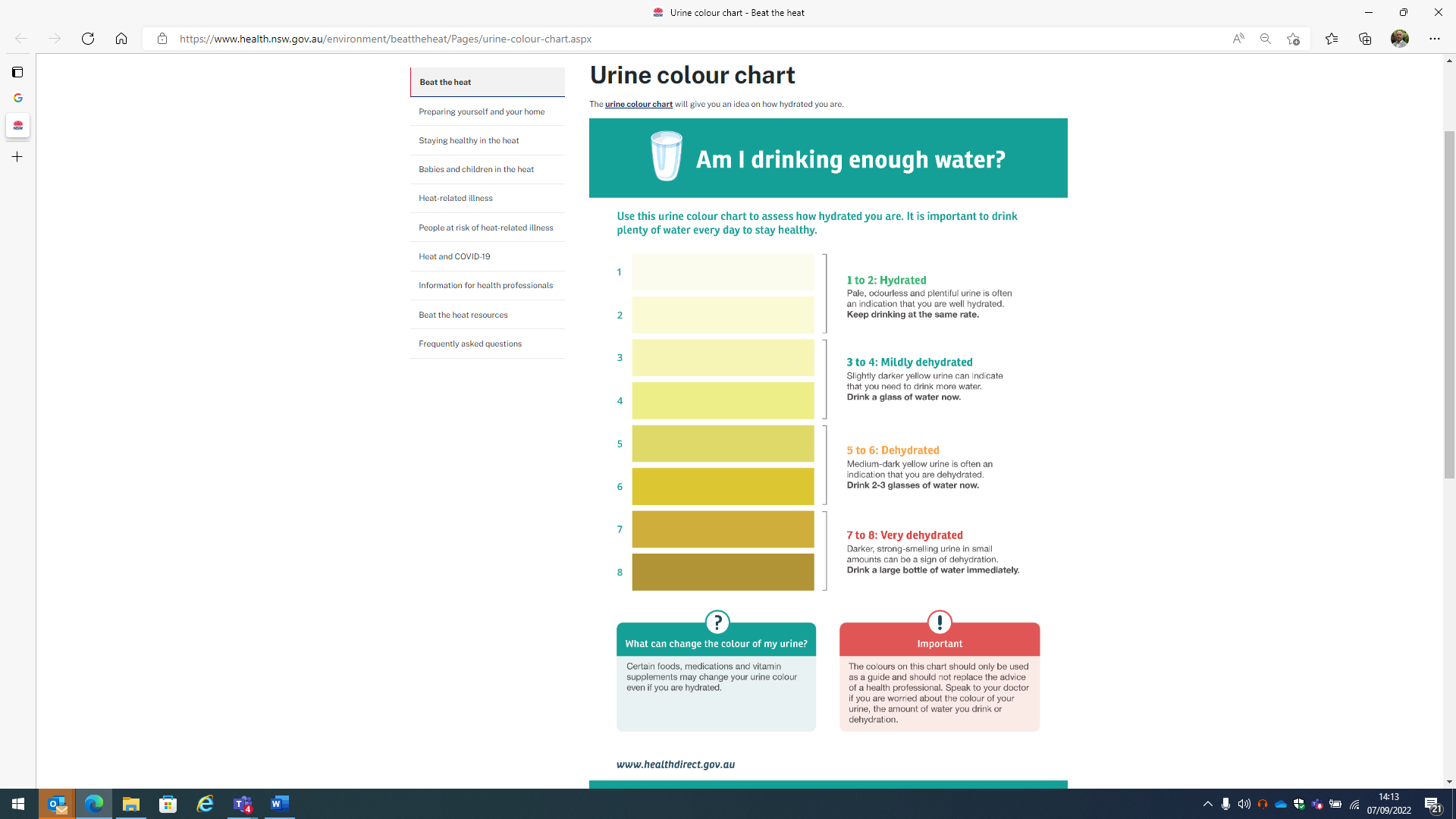
**ANNEX C**

**Hydration Guidance**

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| Symptoms of dehydration:   * feeling thirsty * dark yellow and strong-smelling urine * feeling dizzy or lightheaded * feeling tired * a dry mouth, lips and eyes * urinating little, and fewer than 4 times a day | Dehydration can happen more easily if you have:   * diabetes * vomiting or diarrhoea * been in the sun too long (heatstroke) * drunk too much alcohol * sweated too much after exercising * a high temperature of 38C or more * been taking medicines that make you pee more (diuretics) |

Recognising there may be a problem:

Thirst alone may be a poor indicator of fluid requirements during exercise / arduous physical work.



If officers are exposed to heat continually, they should be advised to drink water regularly during the day to ensure their urine always remains pale yellow in colour. For planning requirements, supervisors should be aware that daily water requirements can increase from 2-4 litres to as much as 8-12 litres in extreme conditions, depending on physical activity levels.

Supervisors should be aware that either inadequate or excess water intake is associated with sub-optimal mental, physiological, and physical function. Adequate hydration is therefore essential to support maximal heat loss via efficient sweating and to prevent the development of illness.

The law requires employers provide drinking water and ensure that:

* It is free from contamination and is preferably from the public water supply - bottled water dispensers are acceptable as a secondary supply.
* It is easily accessible by all employees.
* There are adequate supplies taking into consideration the temperature of the working environment and types of work activity.
* Cups or a drinking fountain are provided.

When working hard or at a high rate in heat stress conditions employees should consume around 250 ml (half a pint) every 15 minutes. This approach may not be practical due to the nature of the task, e.g wearing PPE that restricts the ability to drink or working where hygiene requirements prevent the consumption of food or drink. In these circumstances promoting drinking before, during and after a high-risk activity is one of the most important preventive measures that a supervisor can influence.

Guidelines:

* A minimum of 500 ml of water 2 hours before the task.
* A further 300 ml over the 15 minutes before the task.
* One litre of water over 1-2 hours after the activity.

Whilst rehydration is an important preventative measure, over hydration does not further reduce the risk of heat illness. Over-hydration can cause potentially severe medical consequences (e.g. nausea, vomiting, headache, irritability and loss of consciousness) and can be fatal. Only in exceptional circumstances should the daily fluid intake exceed 12 litres. The hourly rate of fluid intake should not normally exceed 1.25 litres per hour.

Complete restoration of a fluid volume deficit requires electrolyte (mainly sodium) replacement in food and beverages. To prevent salt depletion in environments where the required work rate is associated with prolonged or persistent sweating, officers who maintain an adequate food intake throughout the day will consume sufficient salt (in food) to replenish body sweat losses. It is therefore important meals are not missed.

When conditions do not permit the eating of meals or snacks, and/ or personnel experience heat anorexia (i.e. reduced appetite), it is recommended that electrolyte beverages are provided for replacing fluid and salt. This would be especially important during periods of prolonged work without additional food.

Sports drinks may assist recovery after prolonged physical activity or replenish energy where access to food is limited. But such beverages should not replace water as the preferred option for all other circumstances. Caffeinated/ high-energy/ stimulant drinks are not recommended for rehydration. These drinks, and some commercially available dietary supplements, may lead to further dehydration and should be avoided. Electrolyte beverages containing sugars encourage the growth of harmful bacteria in water bottles or hydration bladders, which should be thoroughly cleaned at least daily.